

Written Public Comments to the Child Welfare Legislative Oversight Panel
October 21, 2003

I should like to strongly recommend restoration of FACT. For many years I have been active as an advocate for children: as teacher and Director of school programs for disabled children, as a member of the state DCFS Board, helped establish the Duchesne County Children's Justice Center and in many other ways. In a rural area, such as the Uintah Basin, all of us advocates MUST work together, and we have an excellent record of cooperation in this area. FACT was a tremendous help in providing services to fragile families, in keeping children in school, in encouraging families, and by providing emergency services. I can absolutely promise that positive legislative action and support would put FACT back together in our area, and I strongly endorse such action and support. Thank you for your consideration.

Jane A. Thompson
435 722-4737

As a pediatrician who cares for children in the foster and shelter system, I want to express my overall satisfaction for our state's DCFS system. It is quite the trend to sensationalize the DCFS cases where state intervention appears "unreasonable" while overlooking the thousands of children who have been protected by the system. I have been personally involved with dozens of cases involving neglected children who, after entry into the DCFS system have received long-needed medical and dental attention, as well as emotional attention in their foster homes. It is clear from my professional experiences that not every parent knows what is best for their child, and we need a compassionate system that will protect children from neglect and abuse. In the big picture, DCFS performs its role admirably.

I am very concerned with the persistent cuts to the budget of DCFS. Of particular concern to me was the elimination of the FACT (Families, Agencies and Community Together) Program that helped keep fragile families together. I found that program very helpful to many of my patients and their families, finding solutions to keep children out of the foster system. Every effort should be made to restore this preventive program. I am also concerned about the children being placed in kinship care. More support through DCFS, especially accessibility to health care coverage, needs to be available to help these extended families care for the children, and again, keep them out of the foster system.

In my opinion, the DCFS system is not broken. Continuing budget cuts will make their important job harder. Restoration of important programs is my recommendation for improving the child welfare system.

Thank you for this opportunity to provide input.

Respectfully submitted,

Karen F. Buchi, M.D.
Associate Professor of Pediatrics University of Utah 585-6943

My name is Debbie Kartchner, I have been a foster parent for the past four years. I have had thirteen foster children come into my home and have adopted four. I chose to become a foster parent because I love caring for children and I believe in children's rights. Currently I am the secretary of the Utah Foster Adoptive Family Association and I am the Cluster Facilitator for foster adoptive and Kinship families in my area. As Cluster Facilitator I work closely with families to provide support, training and activities. I feel that the Foster Care Foundation should be praised for there efforts in forming this program. If Foster, adopt and Kinship families choose to participate in this program they can receive great support and training while caring for the children that come into their homes. While serving in the capacities that I have mentioned I have been able to meet many people and to hear many stories. I feel that the state is doing it's best to only remove children when it is unsafe for the child and does everything in it's power to return the children to the birth families. I have a couple of areas of concern that I would like to address at this time

1.. Many children are currently coming into the system drug addicted at birth. The drugs of choice are becoming harder to get off of. (Such as Meth.) In turn drug addicted birth mothers are having drug addicted babies year after year. If a drug user on the street approached an innocent by-stander and forced drugs into his system against his will charges would be pressed and jail time spent. If the same user repeated the offence over and over again I would think that the user would be kept away from the general public. This is what is happening to these babies. One drug addicted mother said in court, I do not see how you can press charges against me. I was not feeding drugs to my baby, I was taking drugs for my own use and just happened to be pregnant at the time. This mom has had several drug addicted babies. Why isn't there some kind of law similar to the three strikes your out. Parents that receive help over and over again should be required to have their tubes tied or vasectomies or be sent to prison. Do these unborn children not have any rights? How do we explain the life long mental and physical consequences that they have to suffer due to this drug use?

2.. Currently the state is training all foster parents and Caseworkers in The Practice Model Training. This teaches foster parents and case workers to work as a team with the birth parents to help reunite these families. We are encouraged to see the strengths of the birth families and help them to build on these strengths. This looks great in theory and on paper. There are two concerns that I have about this trend.

a) Reality is that in many cases we are working with families that do not want to change or do not have the ability to change. (Every foster child that has come through our home has come from parents that were once foster children and returned to drug addicted and violent homes. It is a vicious cycle.) In some cases I see foster families working closely with these families. Many of the birth families having extensive criminal backgrounds and violent behaviors. If the birth parents rights are terminated and the foster family often adopts the children. This prevents more disruption in the child's life. Because the birth families have become so familiar with the foster family they have names, phone numbers and addresses and proceed to harass the now adoptive family. I have seen quite a few cases of this in my area this past year. I also know of families that are choosing to stop fostering because of how this teaming process is being handled. We need to come up with a plan that will let foster parents be a part of the team without the safety of their families being compromised. I have worked with a case worker that has asked my opinion and taken my suggestions seriously and yet I was able to remain anonymous. The case

worker was in contact with myself and the child on a regular basis and was able to relate praises and concerns to the birth family. In some cases the permanent removal of the child is necessary. The cycle has to be stopped, but the adoptive family must be protected!

b) If the Practice Model is going to be used as currently written I believe in order for it to be effective all team players need to be trained the same. This would include the AG, GAL, and Judges. It is very interesting to me how little they really know about the child and the case when it goes to court. I realize that the everyone in the system is overloaded, but it seems to me if we were all on the same page we could make the best decisions for the children.

It seems to me that the state use to be to the far right of the pendulum where birth parents had very little rights now they are at the far left where they do everything for the birthparents. We need to find a happy medium where the child is truly the center and his best interest is met!

I understand how complicated child welfare can be. I also know first hand that the birth parents and children are coming into the system with more complicated problems. Drugs and domestic violence are on a rampage. I would encourage every law maker and policy maker to talk with as many birth parents and foster parents as they can. I realize that it is unrealistic for each of you to walk in our shoes but I do know that you could learn a lot from listening to reality and not just jumping on an isolated story. I wish that you could be a part of a cluster and see all of the great families and the challenges and sacrifices that they face daily.

I have seen good and bad changes in the short time that I have been a foster parent and hope to be a part of making the system better.

Thank you for your time.

sincerely,
Debbie Kartchner
435-843-8610

My main focus, that would be keeping sibling groups together and why we are better off to stay with our siblings after being taken away by the state. Also drug abuse. I just meant my birth mom after being taken away from her at age 1 yr (with my sisters) due to the fact that she was on drugs...after 21 years she had been clean for just 4 years, where would my life been had I not been taken away. true she was given 3 years of chance until we were put up in a foster adopt home. that we were also in for 3 years till we could be adopted.

nevertheless drugs controlled her life and they did mine and my sisters until we were taken away. I agree that kids she have contact with the mother as long as they are in foster care and the mother is trying her hardest to get control over her life and her kids unlike my mom did.

Thanks
Heather Palmer

I am a CASA volunteer and have previously worked in the child abuse and neglect system. The child I work with is incredibly lucky to have been taken away from her family when she was and to have received all of

the care the State has given her. So before I make any recommendations for improvement, I want to first express my gratitude for all that she has received.

She could, of course, use more help. In particular, she, like many foster children, has behavioral problems and those problems have kept her from advancing normally in her education. She is, however, extremely bright and anxious to learn. Like many foster children attention gaining behavior is a critical problem in the classroom. This negative could be used in a positive manner through the use of focused tutors. Many foster children would benefit from individual tutors whose job is to keep them on grade level while they address their emotional and behavioral problems. This type of one on one attention is sorely lacking in the foster care system. Such tutors would make the transitions between schools that tend to occur with foster children smoother and create a better educated child in the end with a greater ability to contribute to society.

I realize this type of service is costly, but for a child whose parental rights have been terminated, there are no inexpensive solutions. Keeping these children on grade level is extremely important, yet often gets lost among the many, significant physical and mental health issues that foster parents and case workers most address. I would happily discuss this issue further if the panel is interested.

Thank you for your time,
Evelyn J. Furse

The State of Utah currently has 542 youth in foster care ages 16 and older that have an independent living plan. Of that number, 223 have an independent living goal with the expectation that they will attain the age of 18 while in foster care. These youth face unique challenges in transitioning to adult living, at times without the continued assistance of a meaningful adult or family relationship in their lives. Too many times youth are released from foster care when they are 18, whether or not they are really ready for successful adult living.

Presently a Utah's Transitions to Adult Living Support Network is being developed by the Division of Child and Family Services (DCFS) in collaboration with other community partners to provide assistance to youth transitioning from DCFS custody to independent living through a private/public network of support in order to promote their success in adult living. This assistance includes assessment, mentoring, self-esteem building, personal future planning, caregiver and family networking, basic life skills training, housing leisure skills, education, employment, on the job training, information and referral,

crisis support, medical and mental health, and limited financial assistance.

This summer two statewide summits were held, one for youth in care in June and one for adults representing community partners interested in supporting and finding resources for youth transitioning to adult living in September. In June 75 youth along with staff from DCFS and foster care alumni met to gain feedback on the needs of youth transitioning from care. In September 140 adults representing 42 different agencies met to review the youth summit feedback and to identify issues and goals for helping youth successfully transition to adult living.

Attached is a draft of the Five Year Plan for Utah's Transitions to Adult Living Support Network to help bring community partners together to help find services and resources for youth in foster care who are transitioning to adult living as well as the foster families who care for these youth. Support of youth in foster care as they move towards independence is critical to their long term well being, but resources are often limited. Increased support from community partners has been shown to be valuable in helping these youth to transition successfully.

I appreciate the opportunity to present this information to the Child Welfare Legislative Oversight Panel and encourage your support as we find ways to better assist youth leaving foster care in their transition to successful adult living.

Thank you for your consideration,

Lisa McDonald
on behalf of the
Transitions to Adult Living Summits Planning Committee

There have been several important changes to the Child Welfare System and the Involvement of the Juvenile Court in the last several legislative sessions. These changes relate to the requirement for warrants to remove children from their parents; the pilot on public access to the juvenile court which begins November 1, 2003; and many ongoing changes with regard to DCFS Rules and Practice Guidelines, the Federal Audit and PIP Plan, and the ongoing monitoring through the Federal Court in David C. v. Leavitt.

I would like to see how these things are going to impact children's cases and the system over the next year. Its difficult to suggest changes until we determine the impact of the many changes already created and in process.

There will always be tension in the system in terms of the difficult balance of parents rights and the right of the state to intervene to protect children and children's rights in that process. However, I think that the data from DCFS clearly demonstrates that Utah has one of the lowest if not the lowest rate of removal of children from their homes per capita, even

given the demographic information which would indicate risks to children such as exposure to drugs, and other criminal forms of child abuse and neglect.

The Division is clearly working very hard to provide preventive and interventive services short of removing children and the data and outcome indicators prove this. Family Team Meetings and Family Group Conferencing are national models that DCFS is implementing in order to have greater extended family involvement to assist the parents and to serve as placements for children where out of home care is warranted.

In addition the juvenile courts have implemented many programs to assist families which are non-adversarial in nature such as offering mediation in child welfare cases. There is also a focus on providing services up front to families through the dependency drug court and the therapeutic justice court (all through the juvenile court).

I believe we need to continue to work together towards positive outcomes for children and families in an atmosphere sensitive to the safety of children and the well being of children and families. I think people on all sides would agree that service availability is critical to assisting children and families.

Thank you
Kristin G. Brewer, Director
Office of Guardian ad Litem and CASA
